



09.13.05

2155
RCE

Request For Continued Examination (RCE) Transmittal Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/840,588
	Filing Date	April 23, 2001
	First Named Inventor	Gang Wang
	Group Art Unit	2155
	Examiner Name	Victor D. Lesniewski
	Attorney Docket Number	155507.01

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above- identified application. Request for Continued Examination (RCE) practice under 37 CFR § 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. **Submission required under 37 C.F.R. § 1.114** Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).

a. ☒ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.

i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

ii. ☒ Other **Amendment After Final Rejection dated 08-10-05 (copy of which is enclosed)**

b. ☐ Enclosed

i. ☐ Amendment/Reply

ii. ☐ Affidavit(s)/Declaration(s)

iii. ☐ Information Disclosure Statement

iv. ☐ Petition for Extension of Time

v. ☒ Other **Copy of this RCE Transmittal; Fee Transmittal (in duplicate; total fee \$790.00); General POA and 3.73 Statement; Express Mail Certificate; Return Receipt Postcard;**

2. **Miscellaneous**

a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of _ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(f) required)

b. ☐ Other _____

3. **Fees** The RCE fee under 37 C.F.R. § 1.17(e) is required by 37 C.F.R. § 1.114 when the RCE is filed.

a. ☒ The Director is hereby authorized to charge the following fees, additional fees which may be required, or credit any overpayments, to Deposit Account No. **50-0463**. A duplicate copy of this sheet is enclosed.

i. ☒ RCE fee required under 37 C.F.R. § 1.17(e) (\$790.00)

ii. ☐ Extension of time fee (37 C.F.R. §§ 1.136 and 1.17)

iii. ☐ Other _____

b. ☐ Check in the amount of \$ _____ enclosed

c. ☐ Payment by credit card (Form PTO-2038 enclosed)

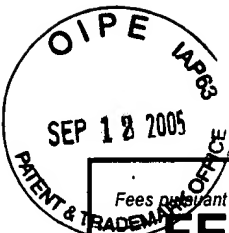
SIGNATURE OF ATTORNEY OR AGENT			
Name	James R. Banowsky	Registration No.	37,773
Signature	<i>James R. Banowsky</i>	Date	7-12-05

CERTIFICATE OF MAILING OR TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.			
Signature			
Name		Date	

EXPRESS MAIL CERTIFICATION (Express Mail Label No. EV 690448785 US)	
I hereby certify that this correspondence is being deposited with the United States Postal Service (USPS) as correspondence to be delivered by the "Express Mail Post Office to Addressee" service of the USPS with sufficient postage in an envelope bearing the above-noted Express Mail mailing label number and addressed to Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.	
Signature	<i>Shirley Smith</i>

09/14/2005 EFLDRES 00000074 500463 09840588

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Effective on 12/08/04
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	790.00
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Complete if Known	
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Examiner Name	Victor D. Lesniewski
Art Unit	2155
Attorney Docket No.	155507.01
Express Mail Label No.	EV 690448785 US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **50-0463** Deposit Account Name: **MICROSOFT CORPORATION**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	0

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
33	- 33 or HP= 0	x 50	= 0		0	0

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
7	- 7 or HP= 0	x 200	= 0

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 = 0	/ 50 = 0	(round up to a whole) number x 250	= 0	0

4. OTHER FEE(S)

Non-English Specification,	\$130 fee (no small entity discount)	Fees Paid (\$)
Other: Request for Continued Examination (RCE) Fee		0
		\$790.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent) 37,773	Telephone (425) 705-3539
Name (Print/Type)	James R. Banowsky	Date	9-12-05